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		Application Number	09/608,184	MAY 2 & ZUUD						
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Filing Date	June 30, 20	June 30, 2000						
		First Named Inventor	Samuel N. 2	Samuel N. Zellner						
		Art Unit	2134	2134						
		Examiner Name	Christopher	Christopher J. Brown						
Total Number of Pages in This Submission:	Attorney Docket Number	F BS99224	BS99224							
ENCLOSURES										
(Check all that apply)										
		·		·						
Fee Transmittal Form (ID DOPC CANE) Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request	Drawing(s) Licensing-related Partition Petition to Convert to Application Power of Attorney, R Change of correspon	a Provisional	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below):							
Express Abandonment Request Information Disclosure Statement	Request for Refund CD, Number of CD(s	,	1.116 Response & Amendment to April 28, 2005 Advisory Action							
Certified Copy of Priority Document(s) Response to Missing Parts/Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks:		-,-,-							
SIGNA	TURE OF APPLICAN	T, ATTORNEY, OR	AGENT							
Name (Print/Type)	Bambi Faivre Walters		Reg. No.:	45,197						
Signature	Poli Die	Walt								
Date	May 26, 2005									
CERTIFICATE OF TRANSMISSION / MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, PO Box 1450, Alexandria,										
VA 22313-1450 on the date shown below. Name (Print/Type)	Bambi Faivre Walters		Date	May 26, 2005						
Signature	8ch Du									

										
FEE TRANSMITTAL for FY 2005			Application Number	09/608,184						
			Filing Date		June 30, 2000					
			First Named Inventor		Samuel N. Zellner					
	TOT FY	ZUUJ		Examiner Name	Christopher					
☐ Annileant dains	s small entity status. See			Art Unit	2134		·······			
Chlarens com				Attorney Docket No.	BS99224					
	HALINT OF BASE	EME	\$420.00 ·	Aminoy Booker No.	15000227					
	MOUNT OF PAYM		<u>\$120.00</u>							
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☐ Deposit Account Deposit Account No. 19-2167 Deposit Account Name:										
	thorized to: (check	all that apply)			Chama fool	s) indicated below, excep	t for the filing fee			
Charge fee(s) in	ndicated below		(-)d 27 CSD 1 1	6 and 1 17			t tot the ming too			
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.1				· · · · · · · · · · · · · · · · · · ·						
				ALCULATION			· · · · ·			
1. BASIC FILING	, SEARCH, AND EXA	MINATION FE	ES .							
•			ARCH FEES EXAMINATION FEES							
Application Type	Fee (\$)	Small Entity I	Fee Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Paid (\$)			
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
Plant	200	100	.300	150	160	80 ·				
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0	0	0	. ——			
2. EXCESS CLAI	M FEES	-					٠			
Fee Description			•			Fee (\$)	Small Enty Fee (\$)			
	٠		•			50	25			
) (including Reissues					200	100			
Each independent Multiple dependen	claim over 3 (includi	ng reissues)		٠		360	180			
Total Claims	u Giginia	Extra Claims	Fee(\$)	Fee Paid (S)		Multiple Depender	nt Claims			
TOIGH CHIEFTS	- 20 or HP =		X	=		Fee (\$)	Fee Pald (\$)			
	20 W 111		· 							
HP=highest numb	er of independent clai	ims paid for, if g	greater than 3.							
Indep Claims		Extra Claims	Fee (\$)	Fee Paid (\$)						
l.—	- 3 or HP =		x	`=						
3. APPLICATION	er of independent cla I SIZE FEE			,						
If the specification a	nd drawings exceed 104) sheets of paper sheets or fraction	r (excluding electronically for thereof. See 35 U.S.C.	filed sequence or compute 41(a)(1)(G) and 37 CFR 1	r listings under 37 C .16(s).	FR 1.52(e)), the application :				
Total Sheets		Extra Sheets				Fee (\$)	Fee Paid (\$)			
_	- 1 00 =	<u>·</u>	. /50	(round up) ×	 =				
4. OTHER FEE(S							Fee Pald (\$)			
	offication, \$130 fee (no						120.00			
Other (e.g., late fil	ling surcharge):	37 CFR 1.1	7(a)(1) One month exte	nsion of time		Domatate disametral la	120.00			
SUBMITTED BY:			là tra	145.4		Complete (if applicable)	(757) 253-5729			
Name (Print/Typ	e) Bambi F. Wat	ters	Registration No (Attorney/Agent		J	Telephone:	(141) 233-3163			
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